



Developing Your Vision for Inclusion

SESSION 2

Facilitator's Planning Worksheet



**2 hours,
30 minutes total**

Developing Your Vision for Inclusion

Learning Outcomes

- ♦ *Participants will consider a vision for including infants and toddlers with disabilities and their families.*
- ♦ *Participants will draft their vision for including infants and toddlers with disabilities and their families in their programs.*
- ♦ *Participants will create a representation of their vision to share with their program and community.*

Agenda	Length	Facilitator
Introduction and Overview	5 minutes	
Agree on Ground Rules	5–10 minutes	
Developing a Vision Statement	55 minutes	
Individual Reflections	<i>5 minutes</i>	
Large-Group Discussion	<i>25 minutes</i>	
Small-Group Brainstorming	<i>25 minutes</i>	
Sharing Your Vision	65 minutes	
Small-Group Activity	<i>35 minutes</i>	
Large-Group Share-Back	<i>30 minutes</i>	
Wrap-Up	5 minutes	
Reflections/Continuous Improvement	10 minutes	

Icon Key



Chart



Note



Handouts



DVD



Key Point

Facilitation Team

 Name/Family Voice

 Name/Early Care and Education Voice

 Name/Early Intervention Voice

Presentation

 Date/Time

 Location

 # of Participants

What you will need:

**Charting Equipment:**

- ☐ Flip chart and markers
- ☐ Masking tape or pins

Art Materials:

- ☐ Paper
- ☐ Scissors, glue sticks, tape, etc.
- ☐ Markers, watercolors, etc.
- ☐ Playdough, glitter, pipe cleaners

**Handout (English/Spanish):**

- ☐ #1 Learning Outcomes

Important Considerations

This second session builds on “Session 1: Creating Bright Futures” and allows participants to consider and develop their own vision for services for infants and toddlers with disabilities. It is assumed that the *Creating Bright Futures* DVD has been viewed by participants. Sessions 1 and 2 could easily be combined into a half-day session.

During this session, participants will take the first steps toward developing a collaborative vision statement. The ultimate outcome is to develop a shared vision for including infants and toddlers with disabilities and their families, a vision that is compelling to others in their community. Although it is optimal to develop a vision with all key stakeholders, individual participants can reflect and create visions that can be shared with their team when they return to their program. However, for the vision to be implemented, there must be buy-in from the larger community. In addition, development of the vision must include the perspectives of all key stakeholders—families, early intervention, early care and education programs, and other key community partners.

As facilitators or trainers, you must know your audience. Depending on the composition of the audience, you will adjust the session activities to meet their needs. For example, if teams include families, early care and education, and early intervention providers, team members would need to take their vision back to their respective systems and to other families to gather input and buy-in. If participants come as individuals from a variety of organizations and perspectives, they may want to generate individual visions and plans for how they will share their vision with their program or with other families to garner support. If participants all come from the same program, you may want to group people to allow for a variety of perspectives in small-group activities.

Even if all participants come from the same program, they will need to assure buy-in from families and staff at all levels of the organization, particularly key decision-making bodies (e.g., a policy council, a local interagency coordinating council, or a child care planning council). The vision will evolve throughout this process of developing it, sharing it, and gathering support from a variety of perspectives.

Follow-up Meeting: The group will develop a draft statement of its vision, but may not have enough time to finalize a completed vision statement. Members of the group should meet after this session to finalize the wording of the vision statement and bring it back to the larger group, as discussed above. Once approved, the vision can be shared with the larger early childhood community to establish buy-in.

“People First” Language: In this session, you will be talking about children with specific disabilities, such as Down Syndrome, health impairments, or autism. It is important that you model “people first” language for the participants. “People first” language means that you first mention the child and then the disability. For example: “a child with a disability” or “Joey, who has cerebral palsy.”

Sometimes we slip and say something like “a Down Syndrome child,” where the disability category is used as an adjective. However, referring to the child as “a Downs” or as “the retarded” is unacceptable. We always speak of a child or an adult; not someone identified only by a disability. See Appendix D in the “Facilitator’s Guide” for more information.

Art Materials: A variety of art materials should be made available (scissors, tape, glue sticks, paper, markers, stickers, playdough, glitter, pipe cleaners, water colors, etc.). It is best to put the materials into containers that can be placed before each group at the start of the “sharing your vision” activity.